- 4		1.0	1000			Y	~~		
A	-				Doc	77-47	R I -	m	~~~
ы	m	1116	LEICHE	3 (M:	10 M M .	K 11	IVI	IFTE	11.16

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THA				
TOTAL CLAIMS			48					RATE	FEE		inchest at chief with	FEE
FO	T-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1				NUMB	NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	BLE CLAIMS	49 min	49 minus 20= * 2		7	i.	X\$ 9=		OR	X\$18=	522
IND	EPENDENT CL	AIMS	5 minus 3 = * 2		-		X40=		OR	X80=	160	
MU	TIPLE DEPEN	IDENT CLAIM PI	RESENT		***	ď		+135=		OR	+270=	7.70
*If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	.0_ ; .	OR	TOTAL	1667	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						<u>)</u>	SMALL E	ENTITY	OR	OTHER		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total . 1:		Minus	**		=		X\$ 9=		OR	X\$18=	£ 8. 7.
	independent	NTATION OF MU	Minus	***	TOLAIM	= ,		X40=		OR	X80=	
ys. e	THO KEHESE	NIAHON OF INIC	JUIPLE DEF	ENDEN	CLAIN		· .	+135=	(1)	OR	+270=	
								TOTAL ADDIT. FEE	. *	OB	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3))_		2			٠.
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	*	RATE	ADDI- TIONAL FEE
NDN	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T OL AIM	=		X40=		OR	X80=	
Ш	FIRST PRESE	NTATION OF MU	JETIPLE DEP	ENDEN	CLAIM		L	+135=		OR	+270=	
								TOTAL ADDIT. FEE			TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3)		AUUII. I LL		•	AUUII. FELI	<u> </u>
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	*** PENDENI	T CL AIM	=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135=		OR	+270=	
		ımn 1 is less than th ımber Previously Pa					ן יי ר	TOTAL			TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												